

ORDER FOR SUPPLIES OR SERVICES										Page 1 Of 5			
1. Contract/Purch Order/Agreement No. DAAE20-97-D-0023			2. Delivery Order/Call No. 0075		3. Date Of Order/Call (YYYYMMDD) 2001SEP11		4. Requisition/Purch Request No. SEE SCHEDULE			5. Priority DOA5			
6. Issued By TACOM-ROCK ISLAND AMSTA-AQ-ARCS JUDY PAGLIARO (309)782-5086 ROCK ISLAND IL 61299-7630 EMAIL: PAGLIAROJ@RIA.ARMY.MIL				Code W52H09		7. Administered By (If other than 6) PR ACALA ATTN FIN AND ACCT OFC ROCK ISLAND IL 61299-6000				Code W52H09			
8. Delivery FOB <input type="checkbox"/> Destination <input checked="" type="checkbox"/> Other (See Schedule if other)													
9. Contractor TDF CORPORATION 750 E DIEHL RD SUITE 127 NAPERVILLE IL 60563-0000 Name and Address			Code OPL65		Facility		10. Deliver To FOB Point By (Date) (YYYYMMDD) SEE SCHEDULE			11. X If Business Is <input type="checkbox"/> Small <input checked="" type="checkbox"/> Small Disadvantaged <input type="checkbox"/> Woman-Owned			
12. Discount Terms Net 30 Days							13. Mail Invoices To the Address in Block See Block 15						
14. Ship To SEE SCHEDULE			Code		15. Payment Will Be Made By DFAS ST LOUIS ATT DFAS-SL-FPV 4300 GOODFELLOW BLVD BLDG 110 PO BOX 200009 ST LOUIS MO 63120-0009				Code HQ0304				
Mark all Packages and Papers with Identification Numbers in Blocks 1 and 2													
16. Type of Order	Delivery/Call	<input checked="" type="checkbox"/>	This delivery order is issued on another Government agency or in accordance with and subject to terms and conditions of above numbered contract.										
	Purchase		Reference your <input type="checkbox"/> Oral; <input type="checkbox"/> Written Quotation, Dated _____, furnish the following on terms specified herein.										
Acceptance. The Contractor Hereby Accepts The Offer Represented By The Numbered Purchase Order As It May Previously Have Been Or Is Now Modified, Subject To All Of The Terms And Conditions Set Forth, And Agrees To Perform The Same.													
Name Of Contractor			Signature			Typed Name And Title			Date Signed (YYYYMMDD)				
<input type="checkbox"/> If this box is marked, supplier must sign Acceptance and return the following number of copies:													
17. ACCOUNTING AND APPROPRIATION DATA/LOCAL USE SEE SCHEDULE													
18. Item No.		19. Schedule Of Supplies/Service SEE SCHEDULE CONTRACT TYPE: Labor-Hour			20. Quantity Ordered/ Accepted*		21. Unit		22. Unit Price		23. Amount		
		KIND OF CONTRACT: Service Contracts											
* If quantity accepted by the Government is same as quantity ordered, indicate by X. If different, enter actual quantity accepted below quantity ordered and encircle.					24. United States Of America By: PATRICIA J HARMON /SIGNED/ HARMONP@RIA.ARMY.MIL (309)782-5717					25. Total \$367,760.70		29. Differences	
26. Quantity In Column 20 Has Been <input type="checkbox"/> Inspected <input type="checkbox"/> Received <input type="checkbox"/> Accepted And Conforms To Contract Except As Noted Date _____ Signature Of Authorized Govt Representative _____							27. Ship. No.		28. D.O. Voucher No.		30. Initials		
36. I certify this account is correct and proper for payment Date _____ Signature And Title Of Certifying Officer _____							<input type="checkbox"/> Partial <input type="checkbox"/> Final		32. Paid By		33. Amount Verified Correct For		
							31. Payment <input type="checkbox"/> Complete <input type="checkbox"/> Partial <input type="checkbox"/> Final				34. Check Number		
											35. Bill Of Lading No.		
37. Received At		38. Received By		39. Date Received		40. Total Containers		41. S/R Account Number		42. S/R Voucher No.			

CONTINUATION SHEET	Reference No. of Document Being Continued		Page 2 of 5
	PIIN/SIIN DAAE20-97-D-0023/0075	MOD/AMD	
Name of Offeror or Contractor: TDF CORPORATION			

SUPPLEMENTAL INFORMATION

Production Charts

This task order 0075 establishes CLIN 0082AA to incorporate the Scope of Work for the NMM E-Desk Depot Production Charts. The not-to-exceed ceiling amounts and labor categories are that which follow:

PM	700 hours	\$52,059.00
I4	901 hours	\$56,862.11
I3	3000 hours	\$164,700.00
I2	300 hours	\$13,926.00
I1	300 hours	\$12,357.00
TW	1000 hours	\$24,980.00
SSA	600 hours	\$27,384.00
AA	301 hours	\$6,989.22
Travel		<u>\$8,503.37</u>
		\$367,760.70

The performance completion date is 31 Dec 02.

*** END OF NARRATIVE A 001 ***

Name of Offeror or Contractor: TDF CORPORATION

ITEM NO	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT						
	SUPPLIES OR SERVICES AND PRICES/COSTS										
0082	<u>Supplies or Services and Prices/Costs</u>										
0082AA	<u>SERVICES LINE ITEM</u>				\$ 367,760.70						
	NOUN: NMM PRODUCTION CHARTS SECURITY CLASS: Unclassified PRON: M119R058M1 PRON AMD: 01 ACRN: AA AMS CD: SMC40102000SMC4 <u>Inspection and Acceptance</u> INSPECTION: Destination ACCEPTANCE: Destination <u>Deliveries or Performance</u> DLVR SCH PERF COMPL <table><tr><td><u>REL CD</u></td><td><u>QUANTITY</u></td><td><u>DATE</u></td></tr><tr><td>001</td><td>0</td><td>31-DEC-2002</td></tr></table> \$ 367,760.70	<u>REL CD</u>	<u>QUANTITY</u>	<u>DATE</u>	001	0	31-DEC-2002				
<u>REL CD</u>	<u>QUANTITY</u>	<u>DATE</u>									
001	0	31-DEC-2002									

Name of Offeror or Contractor: TDF CORPORATION

CONTRACT ADMINISTRATION DATA

							JOB		
LINE	PRON/	OBLG					ORDER	ACCOUNTING	OBLIGATED
<u>ITEM</u>	<u>AMS CD</u>	<u>ACRN</u>	<u>STAT</u>	<u>ACCOUNTING CLASSIFICATION</u>			<u>NUMBER</u>	<u>STATION</u>	<u>AMOUNT</u>
0082AA	M119R058M1	AA	2	97	X4930AC5GX6D6D02PSMC401252G	S11116	1LKPSQ	W52H09	\$ 367,760.70
SMC40102000SMC4									
								TOTAL	\$ 367,760.70
SERVICE							ACCOUNTING		
<u>NAME</u>	<u>TOTAL BY ACRN</u>		<u>ACCOUNTING CLASSIFICATION</u>				<u>STATION</u>	<u>AMOUNT</u>	
Army	AA		97	X4930AC5GX6D6D02PSMC401252G	S11116		W52H09	\$ 367,760.70	
								TOTAL	\$ 367,760.70

CONTINUATION SHEET	Reference No. of Document Being Continued		Page 5 of 5
	PIIN/SIIN	DAAE20-97-D-0023/0075 MOD/AMD	

Name of Offeror or Contractor: TDF CORPORATION

LIST OF ATTACHMENTS

List of Addenda	Title	Date	Number of Pages	Transmitted By
Attachment 001	SCPE OF WORK FOR NMM E-DESK	31-AUG-2001	019	